

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

5. Lease Designation and Serial No.

Fee

6. If Indian, Allottee or Tribe Name

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work

DRILL ☒DEEPEN ☐PLUG BACK ☐

7. Unit Agreement Name

b. Type of Well

Oil
Well ☒Gas
Well ☐

Other

Single
Zone ☐Multiple
Zone ☐

8. Farm or Lease Name

2. Name of Operator

AMOCO PRODUCTION COMPANY

Alva P. Murdock

9. Well No.

#1

3. Address of Operator

P.O. Box 17675 Salt Lake City, Utah 84117

10. Field and Pool, or Wildcat

Wildcat

4. Location of Well (Report location clearly and in accordance with any State requirements.)*

11. Sec., T., R., M., or Blk.
and Survey or Area

Sec. 8, T4S, R8W, USM

12. County or Parrish 13. State

Duchesne Utah

17. No. of acres assigned
to this well15. Distance from proposed*
location to nearest
property or lease line, ft.
(Also to nearest drlg. line, if any)

1978'

16. No. of acres in lease

18. Distance from proposed location*
to nearest well, drilling, completed,
or applied for, on this lease, ft.

19. Proposed depth

11,500'

20. Rotary or cable tools

Rotary

21. Elevations (Show whether DF, RT, GR, etc.)

7949' GR

22. Approx. date work will start*

When Approved

23.

PROPOSED CASING AND CEMENTING PROGRAM

Size of Hole	Size of Casing	Weight per Foot	Setting Depth	Quantity of Cement
17 1/2"	13 3/8"	106#	1000'	Cmt to surface
12 1/4"	9 5/8"	54.5#-61#	7500'	to be determined by logs
8 1/2"	7"	32#-39#	TD	to be determined, to

TIGHT
HOLEPROPOSE TO TEST THE GREEN RIVER & WASATCH
FORMATIONS FOR HYDROCARBON POTENTIAL

(See Attachments)

(Well to be drilled in accordance with Rule C-3, General Rules & Regulations)

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24.

Signed

[Signature]

Title

Administrative Supervisor

Date

12/16/82

(This space for Federal or State office use)

Permit No.

Approval Date

Approved by

Title

Conditions of approval, if any:

APPROVED BY THE STATE
OF UTAH DIVISION OF
OIL, GAS, AND MINING

DATE: 12-21-82

BY: *[Signature]*

*See Instructions On Reverse Side

ATTACHMENT TO FORM OGC-1a

Alva P. Murdock No. 1

1) Geologic name of the surface formation: Uinta

2) Estimated tops of geological markers:

Green River	4080'
Lower GR	7180'
Wasatch	7580'
Middle WST	8760'

3) Casing Program: See Form OGC-1a, Item #23

4) Operators minimum specifications for pressure control equipment are explained on the attached schematic diagram. Testing of such is to be performed daily and noted on the IADC Daily Drilling Report. After running surface casing and prior to drilling out, the equipment will be tested to the full working pressure rating as shown on the attached schematic. Thereafter, the equipment will be tested in accordance with State/Federal requirements.

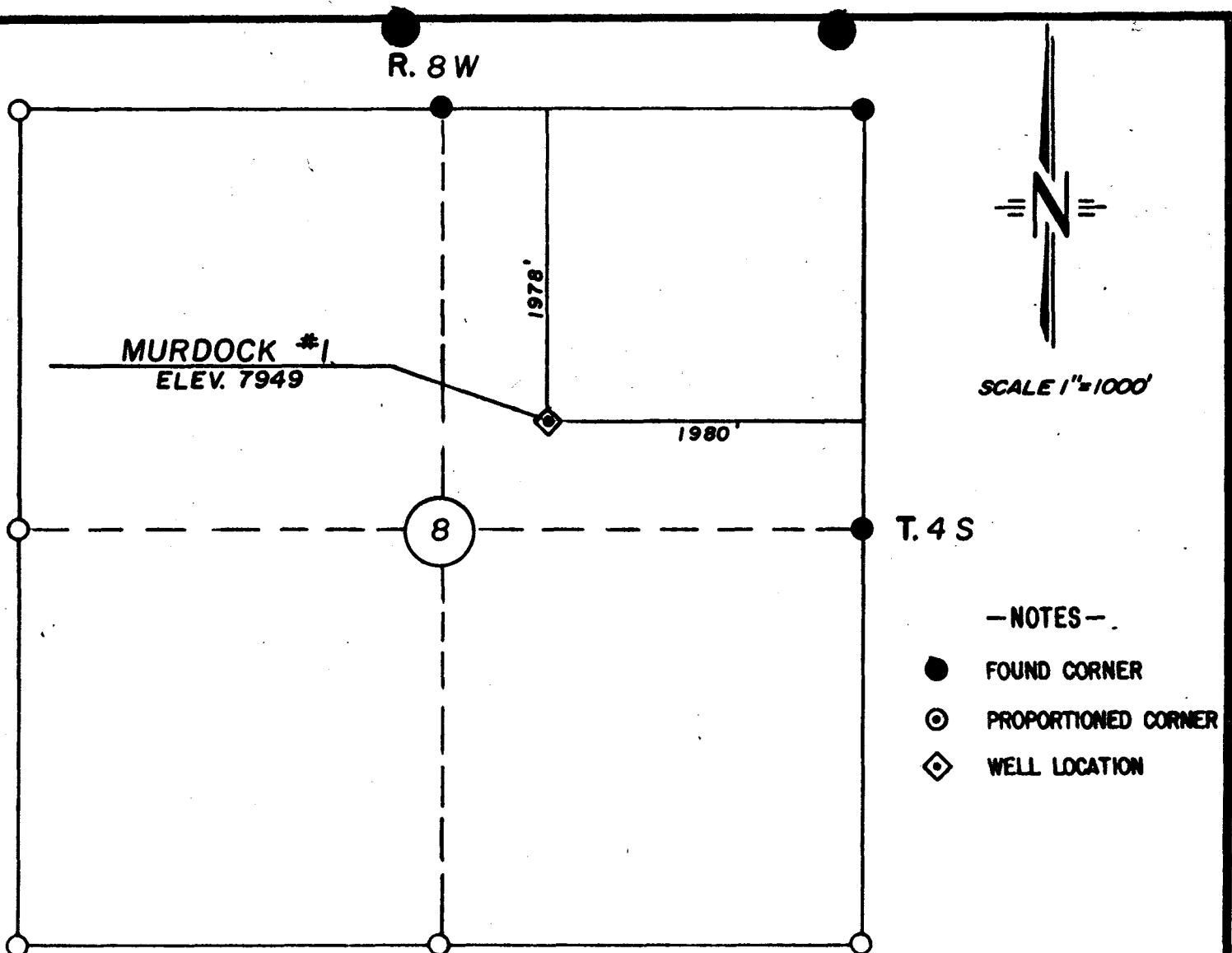
5) Mud Program:

0 - 1000'	Native mud
1000' - 7500'	LSND, w/minimum properties to maintain
	stable wellbore
7500' - TD	" " " " "

6) Logging Program:

DIL	Base of surface casing to TD
CNL-FDC-GR	" " " "
BHC-GR-CAL	" " " "
Microlog w/Cal	" " " "
Televiewer	" " " "

7) No abnormal pressures, temperatures or hydrogen sulfide gas is anticipated.



STATE OF UTAH)
COUNTY OF DUCHESNE) ss CERTIFICATE OF SURVEYOR

I, DICK R. GRIFFIN of Rock Springs, Wyoming, hereby certify that this map was made from notes taken during an actual survey under my supervision on OCTOBER 4, 1982, and that it shows correctly the drilling location of THE MURDOCK #1 FOR AMOCO PRODUCTION CO. as staked on the ground during said survey.

Dick R. Griffin
UTAH R.L. 825120

MAP SHOWING DRILLING
LOCATION OF THE
MURDOCK #1
FOR

AMOCO PRODUCTION CO.

SEC. 8, T 4 S, R 8 W
DUCHESNE CO., UTAH

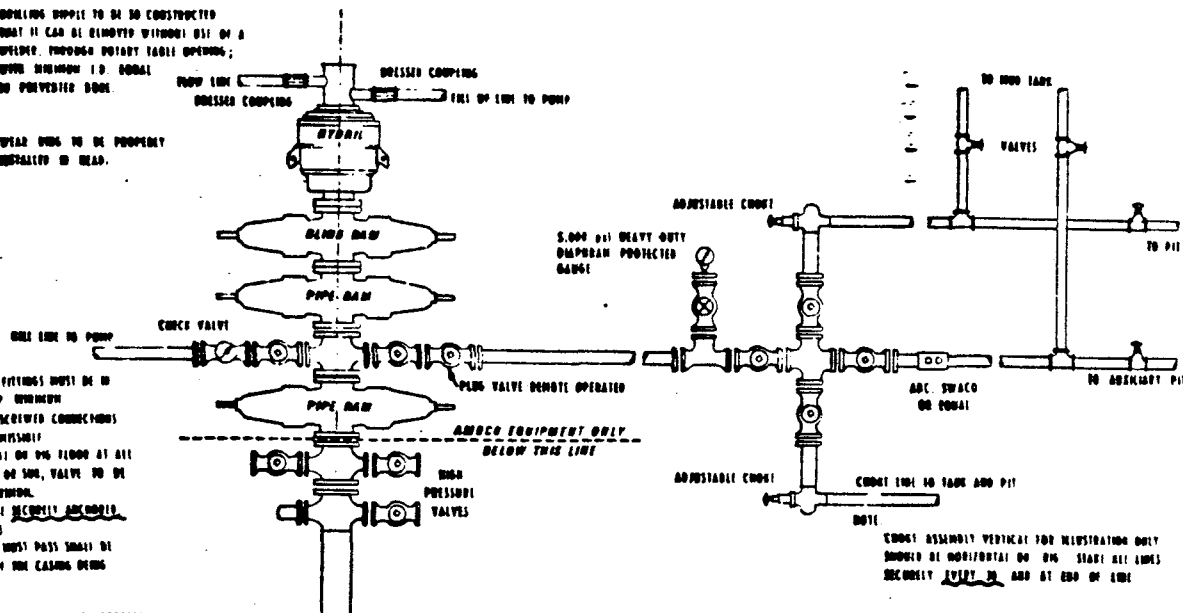
D.R. GRIFFIN AND ASSOCIATES, INC.
P.O. BOX 1059
ROCK SPRINGS, WY. 82901
(307) 362-5028

EXHIBIT BOP-8000
MINIMUM BLOW-OUT PREVENTER REQUIREMENTS
5,000 psi W.P.

NOTE

1 BOLLING SHIPLEY TO BE SO CONSTRUCTED THAT IT CAN BE REMOVED WITHOUT USE OF A WELDER, THROUGH PORTABLE TACKLE OPERATING; WITH MINIMUM 10' CORDAL TO PREVENTED BORE.

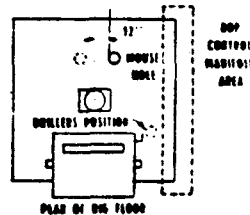
2 WEAR RING TO BE PROPERLY INSTALLED IN HEAD.



NOTE

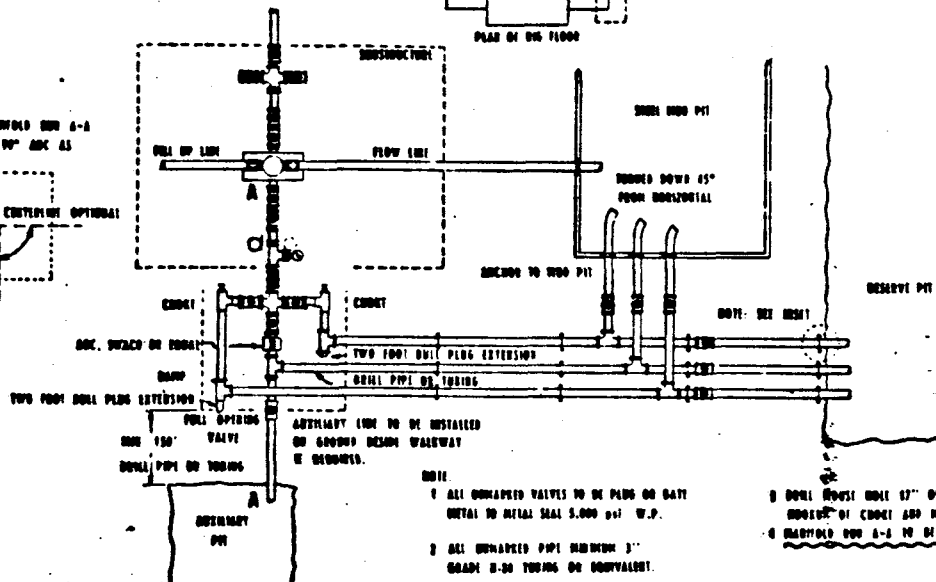
- 1 BLOW OUT PREVENTER AND ALL FITTINGS MUST BE IN GOOD CONDITION 5,000 psi W.P. MINIMUM
- 2 ALL FITTINGS TO BE FLANGED, SCREWED CONNECTIONS DOWNSTREAM FROM CHOKES PERMISSIBLE
- 3 SAFETY VALVE MUST BE AVAILABLE ON THE FLOOR AT ALL TIMES WITH PROPER CONNECTION TO SHUT VALVE TO BE FULL BORE 5,000 psi W.P. MINIMUM
- 4 ALL CHOKES AND RIG LINES TO BE SECURELY ANCHORED, ESPECIALLY ENDS OF CHOKES LINES
- 5 EQUIPMENT THROUGH WHICH OIL MUST PASS SHALL BE AS LARGE AS INSIDE DIAMETER OF THE CASING BEING DRILLED THROUGH
- 6 RIGGY COCK ON RIGGY
- 7 EXTENSION WRENCHES AND BANG WHEELS TO BE PROPERLY INSTALLED AND BRACED AT ALL TIMES
- 8 ON FLOOR BLOW-OUT PREVENTER CONTROL TO BE LOCATED AS CLOSE TO BOLLERS POSITION AS FEASIBLE
- 9 BLOW-OUT PREVENTER CLOSING EQUIPMENT TO INCLUDE ON GALLON ACCUMULATOR TWO INDEPENDENT SOURCES OF PUMP POWER ON EACH CLOSING UNIT INSTALLATION, AND MEET ALL MADE SPECIFICATIONS

NOTE
 ALL VALVES TO BE FULL OPENING



NOTE

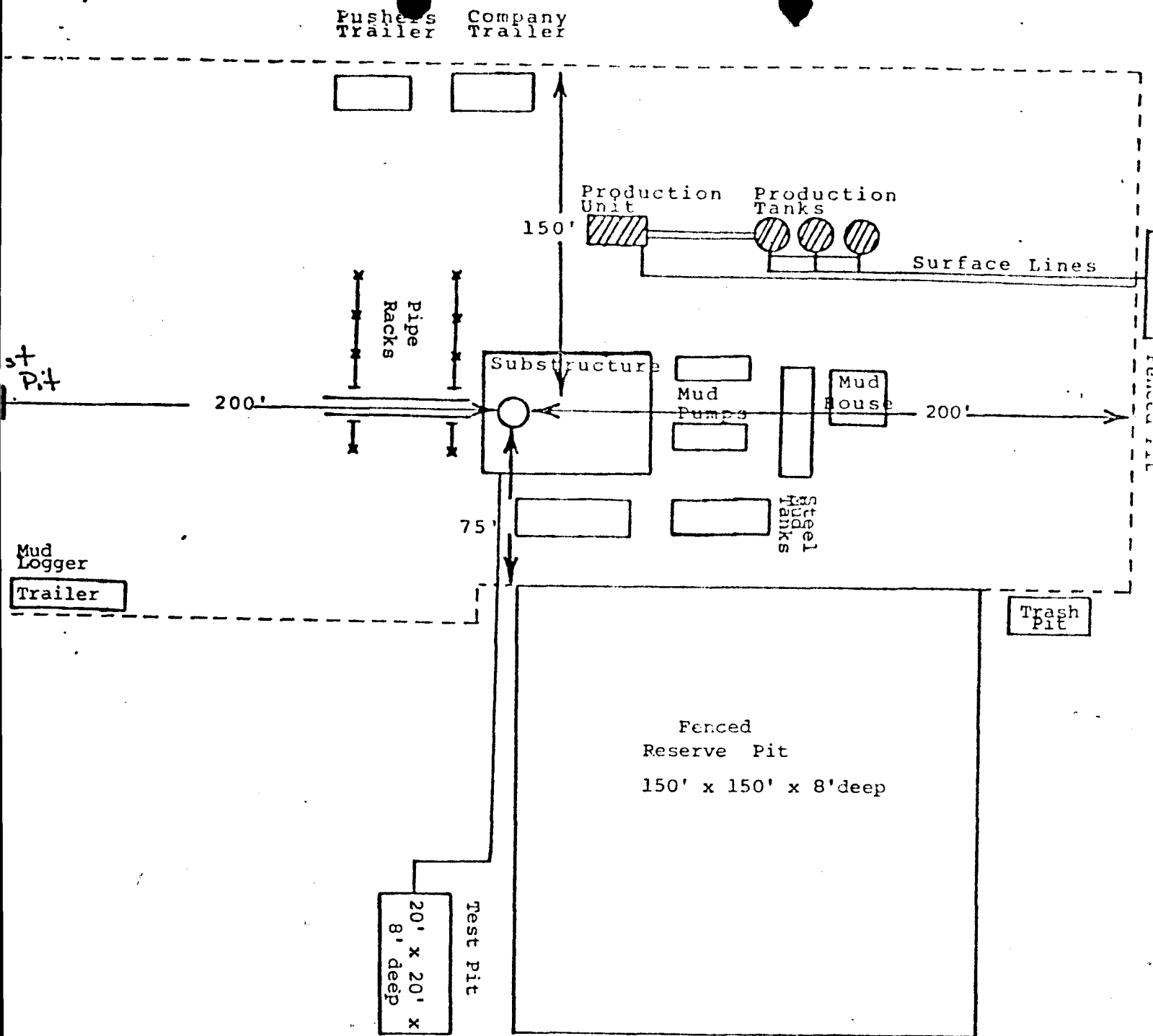
DIRECTION OF MANIFOLD RUN A-A OPTIMUM STRONG 90° ARC AS SHOWN BELOW



- NOTE
- 1 ALL UNWELDED VALVES TO BE PLUG OR GATE INITIAL TO METAL SEAL 5,000 psi W.P.
 - 2 ALL UNWELDED PIPE HAZARD 3" GRADE 8-36 TYPING OR EQUIVALENT.

- 3 DRILL MUST HAVE 12" OFF CENTER IN MIDDLE OF CHOKES AND MANIFOLD IS UPPER BORE
- 4 MANIFOLD RUN A-A TO BE STRAIGHT FROM BOP

Amoco Production Company
STANDARD ASSEMBLY FOR FLUID
OPERATED TRIPLE BLOW-OUT PREVENTER
5,000 psi W.P.



⊗ = Shows permanent production equipment to be installed after drilling rig has moved out.

-- Dotted lines indicated perimeter of leveled location.

The fenced pit used for production will be covered if any fluid is present. The drilling and production pads will be constructed with dozers and graders using native material.

TYPICAL
LOCATION
LAYOUT

AMOCO PRODUCTION COMPANY
P. O. Box 17675
SALT LAKE CITY, UTAH 84117

EXHIBIT "D"

CONFIDENTIAL

OPERATOR AMOCO PRODUCTION CO DATE 12-21-22

WELL NAME ALVA P. MURDOCK #1

SEC SWNE 8 T 4S R 2W COUNTY BUCHESPE

43-013-30731
API NUMBER

FREE
TYPE OF LEASE

POSTING CHECK OFF:

☐

INDEX

☒

HL

☒☐

NID

☒

PI

☐☒

MAP

☒☐

PROCESSING COMMENTS:

NO WELLS WITHIN 1760'

PJE ✓

APPROVAL LETTER:

SPACING: ☐ A-3 UNIT

☐

c-3-a

CAUSE NO. & DATE

☒

c-3-b

☐

c-3-c

SPECIAL LANGUAGE:

☒ RECONCILE WELL NAME AND LOCATION ON APD AGAINST SAME DATA ON PLAT MAP.

☒ AUTHENTICATE LEASE AND OPERATOR INFORMATION

☒ VERIFY ADEQUATE AND PROPER BONDING *BLANKET*

☒ AUTHENTICATE IF SITE IS IN A NAMED FIELD, ETC.

☐ APPLY SPACING CONSIDERATION

☐ ORDER *NO*

☐ UNIT *NO*

☒ c-3-b

☐ c-3-c

☒ OUTSTANDING OR OVERDUE REPORTS FOR OTHER WELLS OF THE OPERATOR.

☒ IF POTASH DESIGNATED AREA, SPECIAL LANGUAGE ON APPROVAL LETTER

December 21, 1982

Amoco Production Company
P. O. Box 17675
Salt Lake City, Utah 84117

RE: Well No. Alva P. Murdock #1
SWNE Sec. 8, T.4 S, R.8 W
Duchesne County, Utah

Gentlemen:

Insofar as this office is concerned, approval to drill the above referred to oil well is hereby granted in accordance with Rule C-3(b), General Rules and Regulations and Rules of Practice and Procedure.

Should you determine that it will be necessary to plug and abandon this well, you are hereby requested to immediately notify the following:

RONALD J. FIRTH - Engineer
Office: 533-5771
Home: 571-6068

OR

CLEON B. FEIGHT - Director
Office: 533-5771
Home: 466-4455

Enclosed please find Form OGC-8-X, which is to be completed whether or not water sands (aquifers) are encountered during drilling. Your cooperation in completing this form will be appreciated.

Further, it is requested that this Division be notified within 24 hours after drilling operations commence, and that the drilling contractor and rig number be identified.

The API number assigned to this well is 43-013-30731.

Sincerely,

Norman C. Stout
Administrative Assistant

NCS/as
Enclosure

DIVISION OF OIL, GAS AND MINING

CONFIDENTIAL

SPUDDING INFORMATION

NAME OF COMPANY: AMOCO PRODUCTION COMPANY

WELL NAME: Alva P. Murdock #1

SECTION SWNE 8 TOWNSHIP 4 S RANGE 8 W COUNTY Duchesne

DRILLING CONTRACTOR American Drilling Company

RIG # 2

SPUDDED: DATE 2-10-83

TIME 9:00 AM

How Rotary

DRILLING WILL COMMENCE

REPORTED BY Butch Quigg

TELEPHONE #

DATE 2-10-83 SIGNED RJF

UTAH

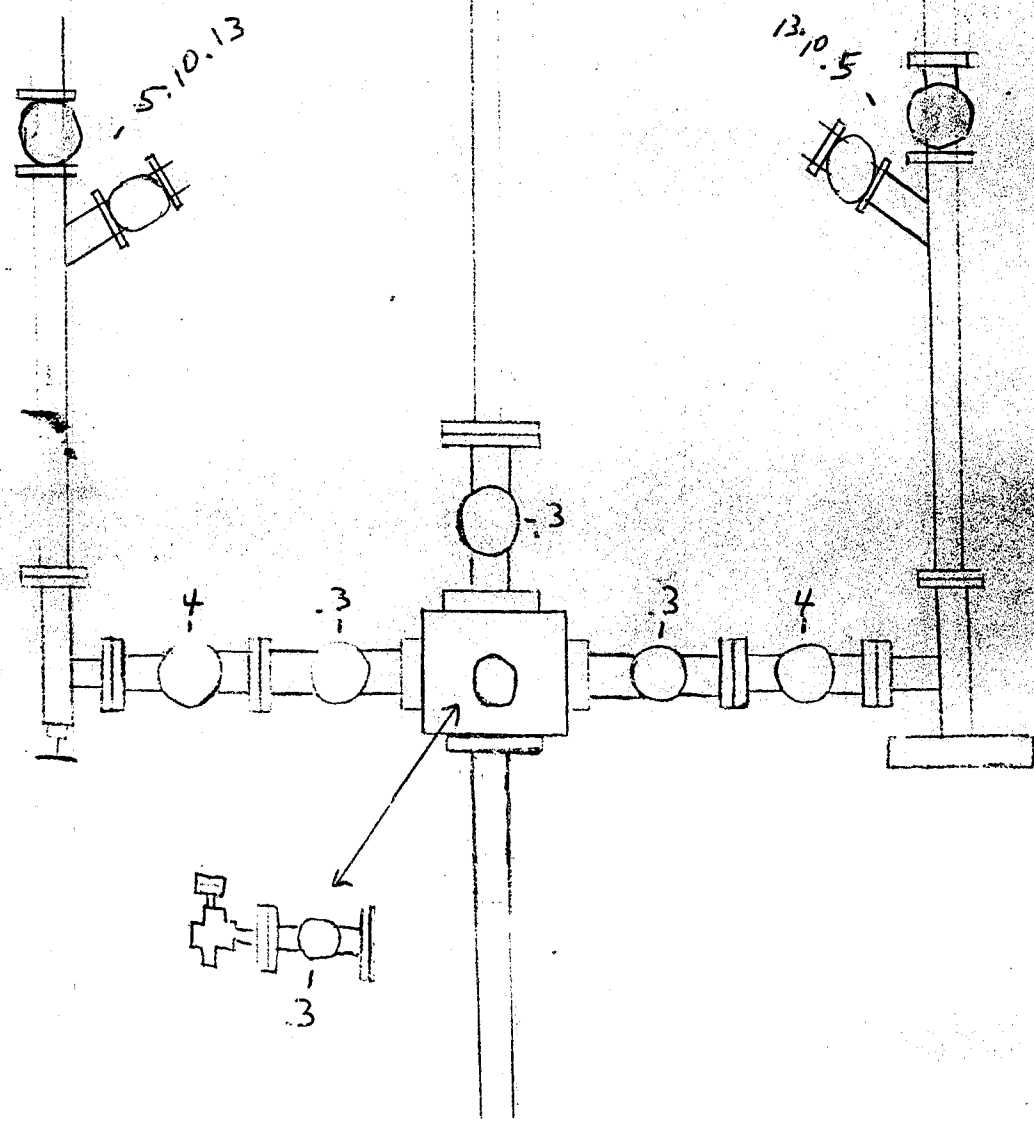
DOUBLE "D" ENTERPRISES
B.O.P. Test Report

B.O.P. TEST PERFORMED ON (DATE) 4-24-83 7101190.....
OIL CO: .. A.moco
WELL NAME & NUMBER .. ✓ A.Lua .. P. Murdoch .. 2
SECTION 8
TOWNSHIP 4 S
RANGE 8 W
COUNTY STATE .. UTAH
DRILLING CONTRACTOR .. American .. 2
INVOICES BILLED FROM: DOUBLE "D" ENTERPRISES, INC.
213 Pine Street
Shoshoni, Wyoming 82649
PHONE NUMBERS: (307) 876-2308, or (307) 876-2234, or 876-9301
TESTED BY: DOUBLE "D" ENTERPRISES, INC.
712 Morse Lee Street
Evanston, Wyoming 82930
PHONE NUMBERS: (307) 789-9213, or (307) 789-9214
OIL CO. SITE REPRESENTATIVE Butch. Quigg
RIG TOOL PUSHER:
TESTED OUT OF Evanston
NOTIFIED PRIOR TO TEST:
COPIES OF THIS TEST REPORT SENT COPIES TO:
..... U.S.G.S. of UTAH
.....
.....
ORIGINAL CHART & TEST REPORT ON FILE AT: .. Evanston OFFICE
Mike Rhykus (307) 789-7298
Shane McKeown (307) 789-4790
(TESTERS)
Evanston, Wyoming 82930

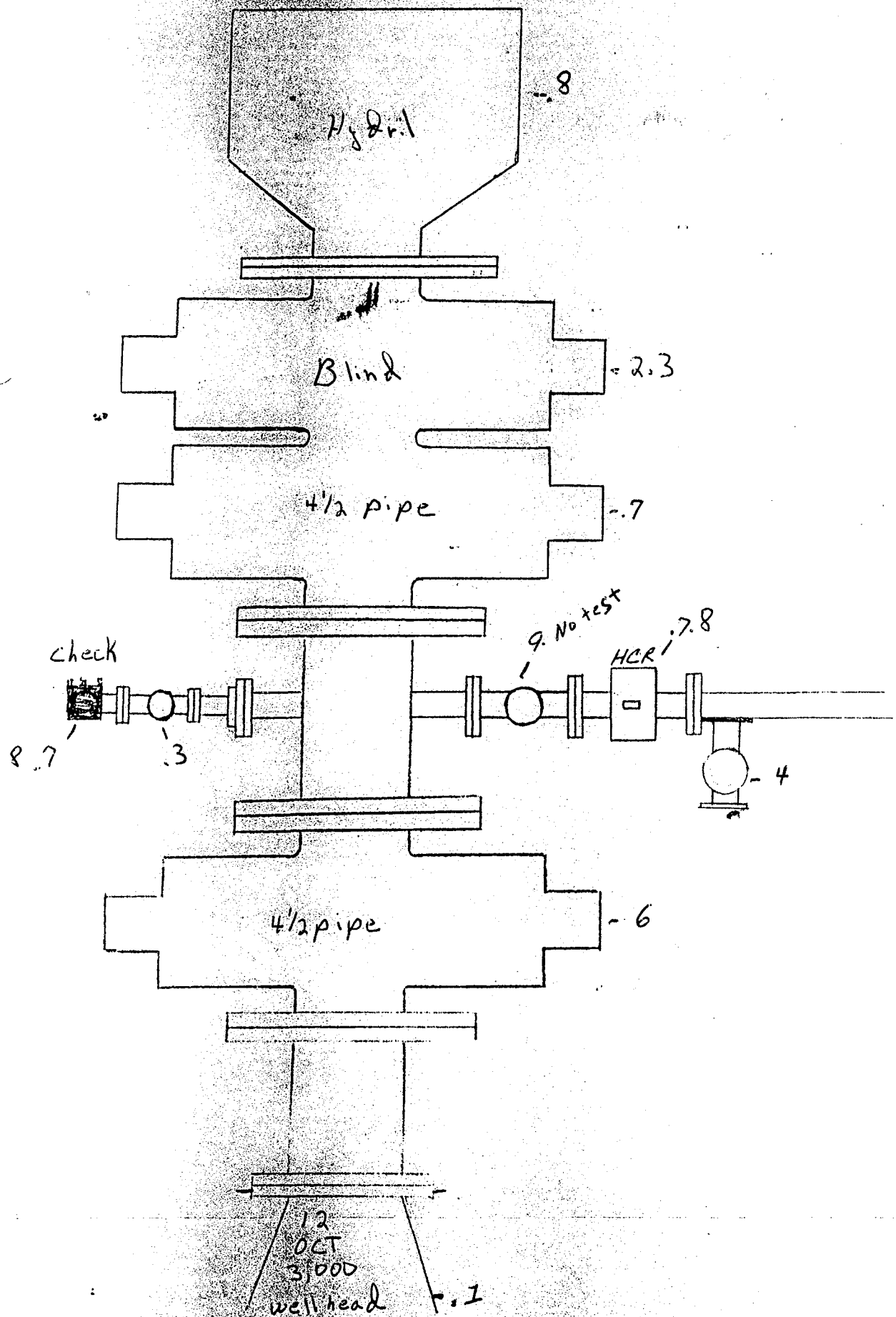
Company		Leased Well Name #	Date of Test	Rig #
Amoco		Alton Muddock	4-24-83	American 2
Test #	Time			
1.	12:45-1:00	test well head		
2.	9:30-9:45	test 4 inch pipe rams		
3.	9:50-10:05	test 3 inch manual on kill line 3 inch manual on manifold + vertical		
4.	10:15-10:30	test 4 inch manual on manifold, back side of HCR.		
5.		test 4 inch outside manual behind chokes		
6.	11:05-11:20	test lower pipe rams		
7.	11:25-11:40	test top pipe rams, check valve on choke line the HCR valve		
8.	12:00-12:20	test 4 inch check valve, HCR on choke line		
9.	12:25	test 4 inch manual on choke line		
10.		test 4 manuals behind chokes, very small test on threaded flange.		
11.	1:35-2:50	lower well		
12.	1:55-2:10	upper well		
13.	2:15-2:30	test 4 manuals behind chokes (good test)		

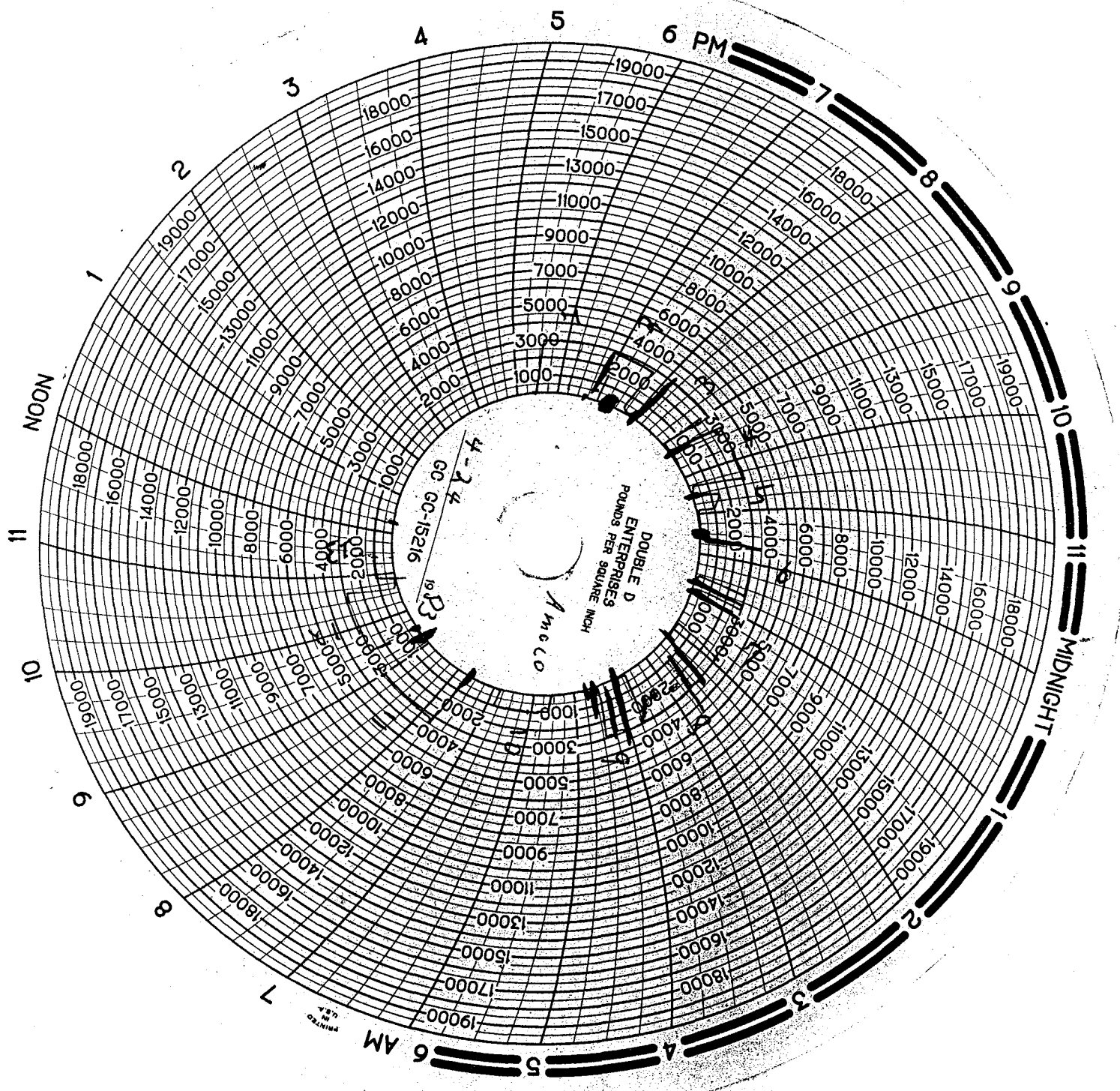
POOR COPY

FIG. 1



American





USGS
UTAH

DOUBLE "D" ENTERPRISES
B.O.P. Test Report

B.O.P. TEST PERFORMED ON (DATE) 5-25-83 Ticket 994

OIL CO: ..Amoco.....

WELL NAME & NUMBER ✓ D. Murdock #1

SECTION 8

TOWNSHIP 4S

RANGE 8W

COUNTY STATE UTAH

DRILLING CONTRACTOR AMERICAN #2

INVOICES BILLED FROM: DOUBLE "D" ENTERPRISES, INC.

213 Pine Street
Shoshoni, Wyoming 82649

PHONE NUMBERS: (307) 876-2308, or (307) 876-2234, or 876-9301

TESTED BY: DOUBLE "D" ENTERPRISES, INC.

712 Morse Lee Street
Evanston, Wyoming 82930

PHONE NUMBERS: (307) 789-9213, or (307) 789-9214

OIL CO. SITE REPRESENTATIVE:

RIG TOOL PUSHER:

TESTED OUT OF ... EVANSTON ...

NOTIFIED PRIOR TO TEST:

COPIES OF THIS TEST REPORT SENT COPIES TO:

ORIGINAL CHART & TEST REPORT ON FILE AT: ... EVANSTON, WYO. OFFICE

Mike Rhykus (307) 789-7298
Shane McKeown (307) 789-4790
(TESTERS)
Evanston, Wyoming 82930

POOR COPY

DOUBLE "D" TESTING

P.O. Box 560
Shoshoni, Wyoming 82649
307-876-2308

DELIVERY TICKET

Nº 994

RENTED TO Amoco NO. American 2
DATE 5-25-83

ORDERED BY _____ LEASE Alva P Murdock WELL NO. 1

Rental begins when tools leave our warehouse and continues until returned thereto. Rental day starts at midnight and part day shall be charged as full day.

TRANSPORTATION - TO AND FROM JOBSITE 252 MILES 1⁰⁰ \$ 252.00

DOUBLE D Portable BLOWOUT PREVENTER PRESSURE TESTING SERVICE:

First eight hour test period 8.00⁰⁰ \$ NO CHARGE

Additional eight hours or fraction. _____ \$ _____

Items Tested:

Top) Blinds	rams to <u>3000</u> #	Csg. to _____ #	Choke Manifold <u>3000</u> #
Mid) Pipe	rams to <u>3000</u> #	Hydril B O P to <u>3000</u> #	Kelly Cock <u>3000</u> #
Bottom) Pipe	rams to <u>3000</u> #	Choke Line <u>3000</u> #	Safety Valve <u>3000</u> #
	rams to _____ #	<u>lower Kelly Cock</u> <u>3000</u> #	<u>DRIVE VALVE</u> <u>3000</u> #

TEST SUBS 1- 4 1/2 x 0 TEST SUB (TOP SUB) \$ 50.00

OTHER 1- 4 1/2 x 0 Test sub (Bottom sub) 50.00

1- 12" OCT TEST PING & RETRIEVER 150.00

54 gallons of methanol @ 2⁰⁰/gal 108.00

Hydril pressure 1600 LBS

Manifold " 2200 LBS

Accumulator Pressure 3000 LBS

Closing time on B.O.P. 5 seconds

* Wear Ring was set after test & Drained choke manifold

* closing valve was closed after test

* All BOP Tests Held 15 minutes B.O.P. EQUIPMENT OPERATED

Five I Tested good Had alot of trouble with Kelly valves

& safety valves had to clean them out had bor & lost circulation

material in them # Had good rig crews on Tour.

We Appreciate Your Business Thanks Phil TOTAL... \$ 610⁰⁰

TERMS NET CASH - NO DISCOUNT. (PRICES SUBJECT TO CHANGE WITHOUT NOTICE): Terms and Conditions Under Which Tools and Other Equipment Are Rented: Lessor exercises precautions to keep its tools and other equipment in good condition, but does not guarantee its condition. All tools and other equipment rented from Lessor is used at Lessee's sole risk. Lessee agrees that Lessor shall not be liable for any damages for personal injuries to any persons or for any damage to Lessor's property or the property of other persons that may be caused by any of such tools or other equipment, or that may be caused by its failure during use, and Lessee hereby agrees to hold harmless and indemnify Lessor against all persons for all personal injuries and/or property damage. Well conditions which prevent satisfactory operation of equipment do not relieve Lessee of his responsibility for rental charges. Lessee assumes all responsibility for equipment while out of possession of the Lessor and promises to return such equipment to the Lessor in as good condition as it was at the effective date of the lease, natural wear and tear from reasonable use thereof excepted. All equipment lost or damaged beyond repair will be paid for by the Lessee at the market price and all damaged equipment which can be repaired will be repaired and the repairs paid for by the Lessee. Accrued rental charges cannot be applied against the purchase price or cost of repairs of such damaged or lost equipment. All transportation charges must be borne by the Lessee. Rental begins when equipment leaves Lessor's yard and continues until returned thereto. ALL TOOLS AND EQUIPMENT SHALL REMAIN the sole property of Lessor. This lease is made and shall be effective when the equipment is delivered to the carrier selected by the Lessee.

TERMS: Net Cash - No Discount. All charges are due and payable at the office of Lessor in Shoshoni, Wyoming on the 20th of the month following date of invoice. Interest will be charged at the rate of 8%. Interest charged after 60 days from date of invoice.

Delivered By: _____ OWNER OR OWNER'S REPRESENTATIVE

By: Phil Derham By: _____

Company

Lease & Well Name

DATE OF TEST

RIG #

Amoco

ADUAP MURDOCK #1

5/25/83

American #2

Page 1

Test #

Time

7:00 am - 10:45 am

loaded tools & headed for rig

10:45 - 11:43

Rigged up to test manifold, run load tools
Rig tripping out of hole when I arrived

#1

11:43 - 11:58

Tested manifold valves see diagram for values
tested valves correspond to test #

#2

12:00 - 12:15

Bumped up bleed off went to another test

NO TEST AT TESTED TEST #15
THIS TIME 499

I worked these valves while testing test #3

#3

12:15 - 12:30

Tested valves on manifold see dia.

#4

12:31 - 12:46

"

#5

12:47 - 12:54

Tested manual choke with 20.3 gallons of fluid

#6

12:56 - 1:37

Tested manual choke & super choke together at same
time no bleed off

#NOTE

10:45 - 1:20

WHILE DOING THESE TESTS ON MANIFOLD RIG WAS
TRIPPING PIPE WHEN FINISHED WE RIGGED UP TO PULL
WEAR RING & HAD TO GET WATER TRUCK TO PUMP OUT
CELLAR TO BE ABLE TO GET TO WELLHEAD. WATER
TRUCK FINISHED @ ABOUT 1:20 BY MY WATCH

#7

1:40 - 1:56

(SEE BOP DIAGRAM FOR ITEMS TESTED) UPPER PIPE RAMS (2 MANUALS)

#8

2:01 - 2:16

(" " (check valve & HCR valve)

#9

2:19 - 2:34

(" " (6 manual valves) & AUC OFF 3000 LBS

#10

2:40 - 2:56

(" " (7 manual valves)

#11

2:58 - 3:13

LOWER PIPE RAMS ONLY

3:13 - 3:29

UNSCREWED FROM PLUG TIGHTEND UP SUBSON HEAT WHICH
WE PICKED UP & SCREWED SUBS ON WHILE RUNNING TEST

8, 9, 10, 11

#12

3:29 - 3:44

Blind Rams (5 manual valves) see BOP dia

#13

3:48 - 4:03

TESTED SAFETY VALVE TIV

#14

4:04 - 5:04

ATTEMPT TO TEST LOWER KEY COCK WORKED ETC NO TEST AT THIS TIME

#15

5:04 - 5:19

UPPER KEY COCK (HAD TO WORK SEVERAL TIMES)

#14

5:21 - 5:30

Retested TIV valve bumped up to 6000 LBS BLEED OFF TESTED AT 3000 LBS

5:30 - 6:17

Broke subs of Kelly, made TEST SUB UPON DALT VALVE
ATTEMPTED TO TEST IT HAD TO CRAW OUTS OUT OF IT

Company

Lease & Well Name

Date of Test

RIG #

Amoco

Amec # 2

Page 2

Test #

Time

PRESSURED UP BACT VALVE LEAKED ON FACTORY MAKEUP
RETIGHTENED IT. PRESSURED UP AGAIN.

16

6:17- 6:33

TESTED BACT VALVE TESTED OK

6:33- 10:57

MADE OUT TICKET LOADED UP TOOLS TRAVELED HOME
UNLOADED TRUCK

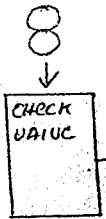
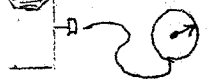
American #2 Tested 5/25/83

UPPER KELLY COCK
HAD TO WORK

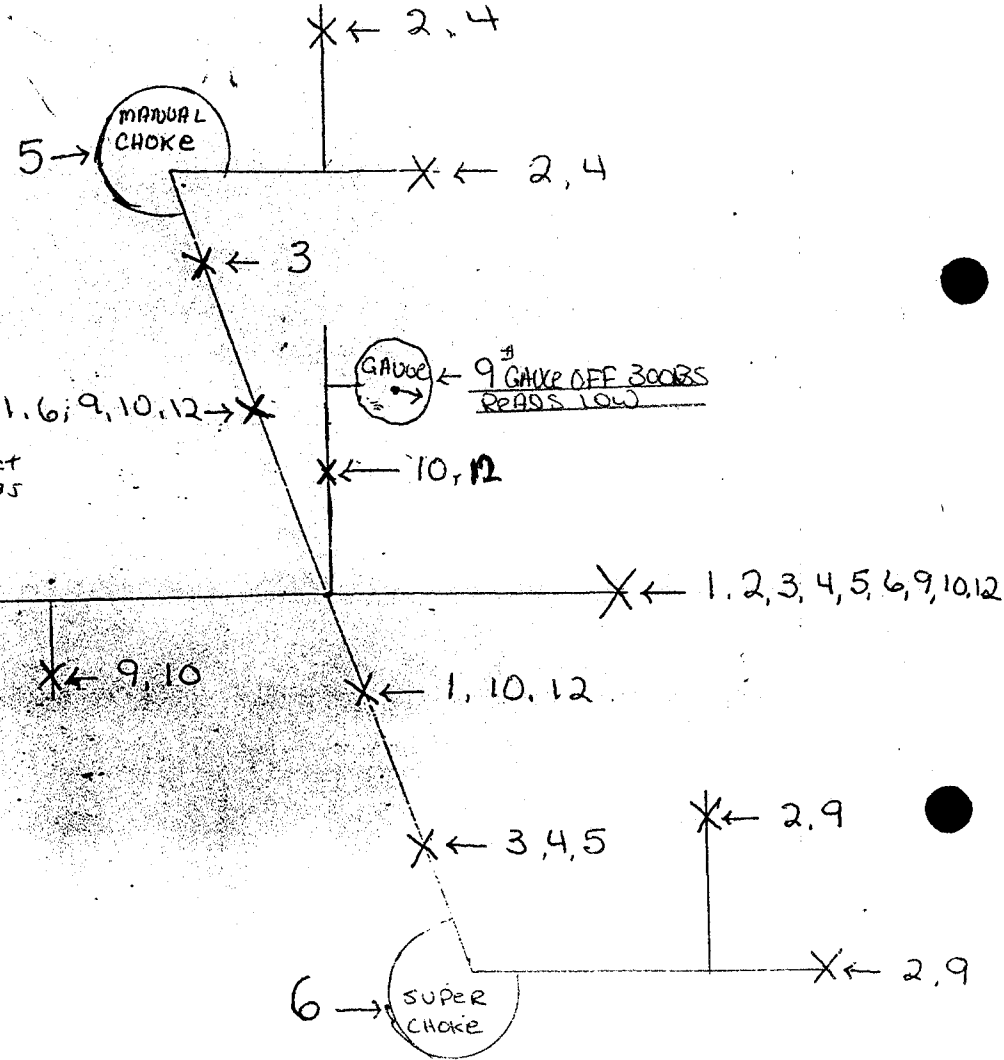
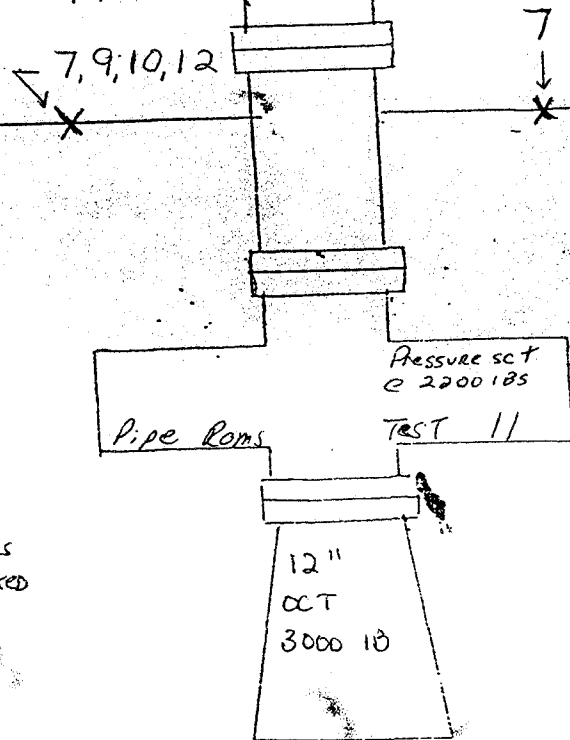
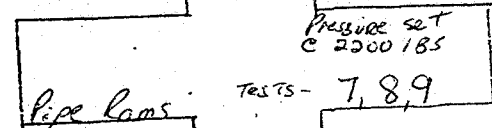
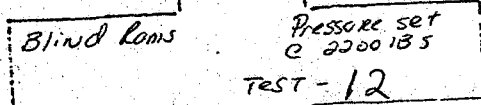
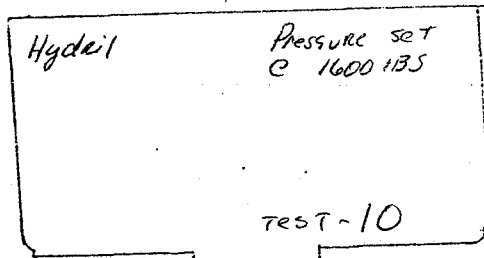
TEST 15

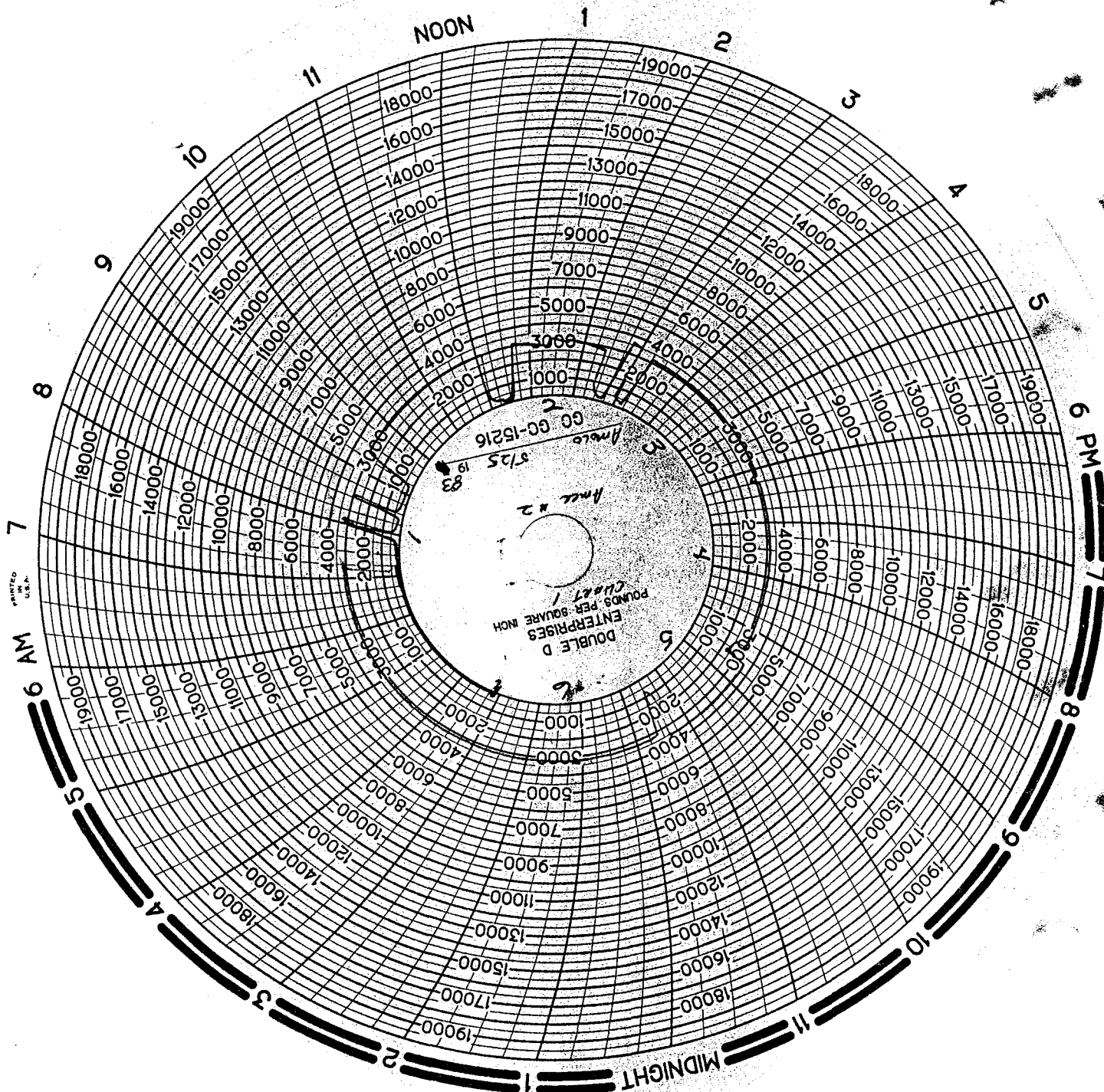
LOWER KELLY COCK
HAD TO WORK &
BUMP UP
TEST 14

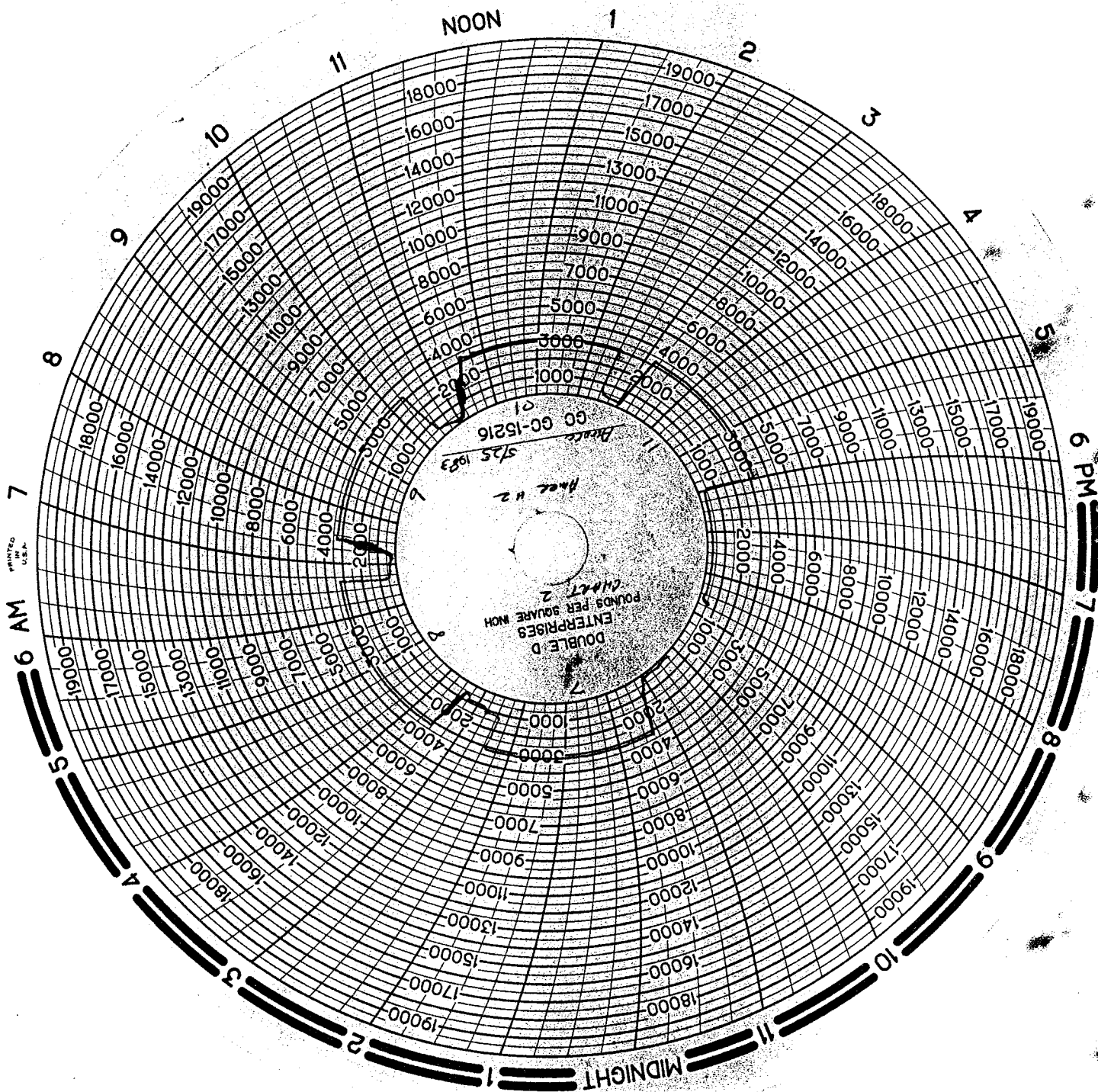
SAFETY VALVE T.W.
TEST 13



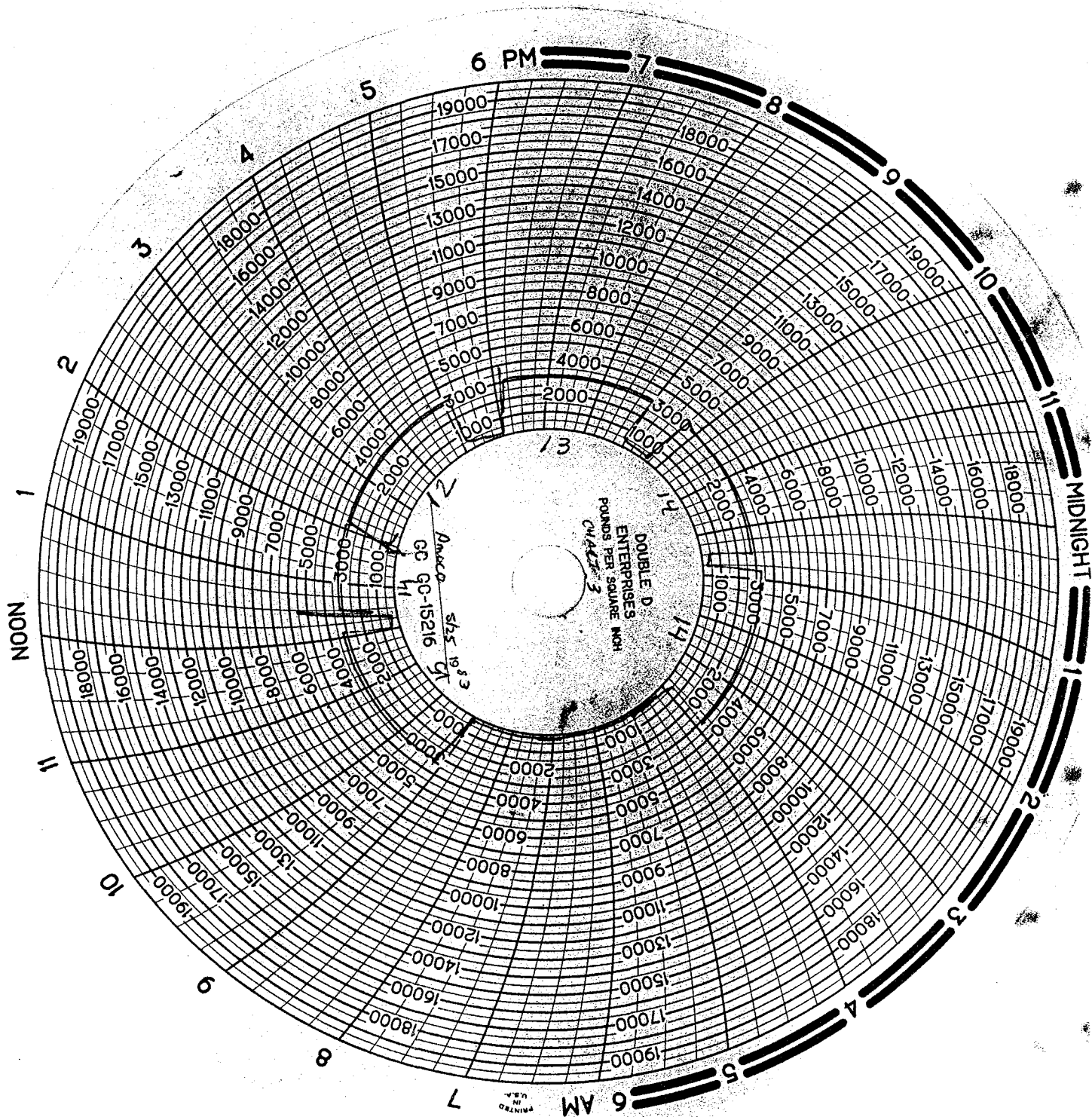
← DART VALVE
TEST #16
HAD TO CLEAN OUT GUIS
← FACTORY BREAK LEAKED
RETIGHTENED

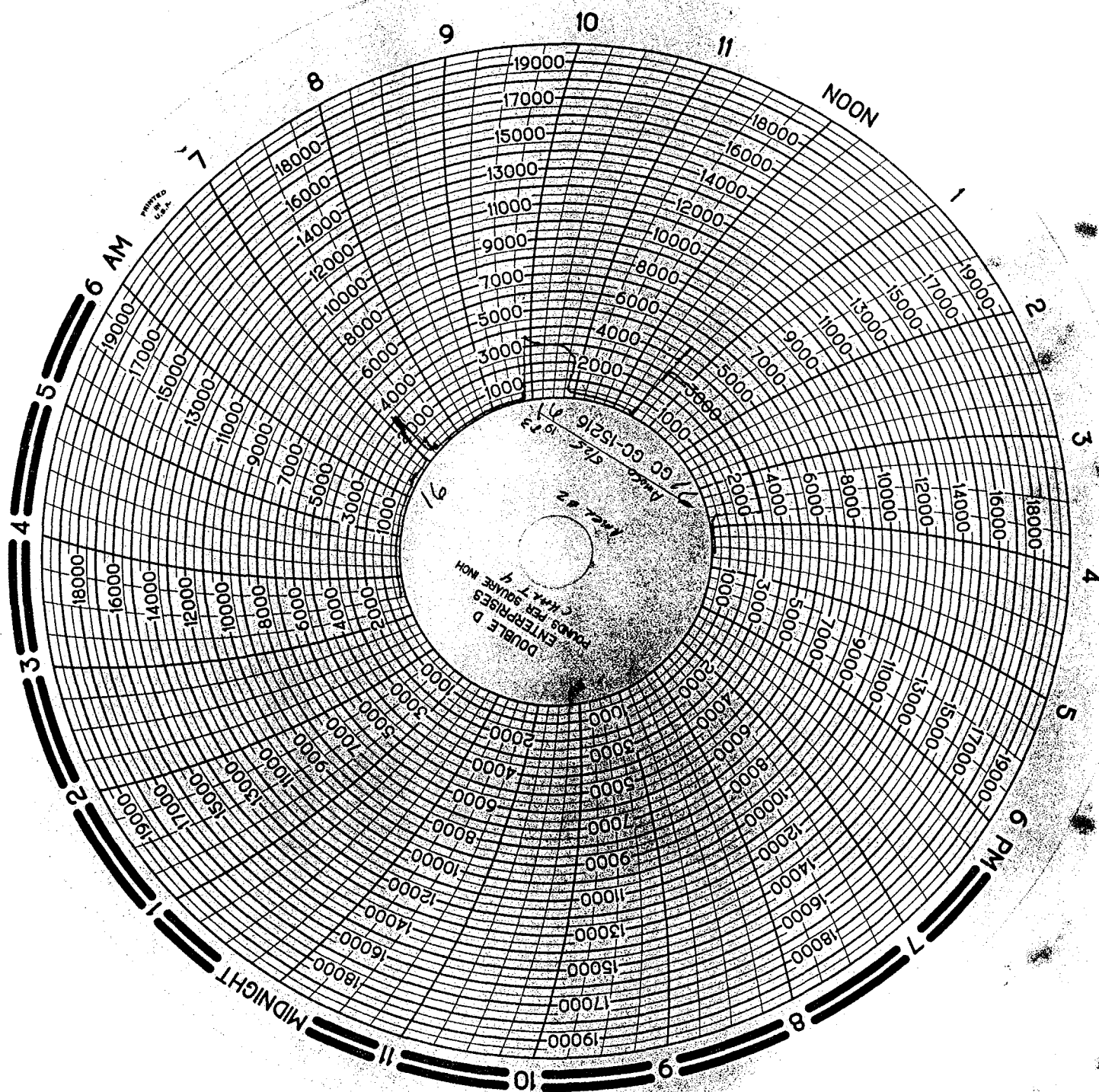






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U.S.A.





STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUBMIT IN TRIPLICATE*
(Other instructions on
reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> 2. NAME OF OPERATOR Amoco Production Company 3. ADDRESS OF OPERATOR P.O. Box 17576 Salt Lake City, Utah 84117 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1978' FNL & 1980' FEL CSW/4 NE/4 14. PERMIT NO. 43-013-30731		5. LEASE DESIGNATION AND SERIAL NO. Fee 6. IF INDIAN, ALLOTTEE OR TRIBE NAME 7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME Alva P. Murdock 9. WELL NO. 1 10. FIELD AND POOL, OR WILDCAT Wildcat 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 8, T4S, R8W, USM 12. COUNTY OR PARISH Duchesne 13. STATE Utah
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 7949' GR		

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) Report of Operations ☒REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Date: 5-16-83

Drilling ahead at: 5355'

Drilling Contractor: American Drilling Company
Rig #2

TIGHT HOLE

RECEIVED
MAY 16 1983
DIVISION OF OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED [Signature]

TITLE Staff Administrative Analyst (SG)

DATE 5/16/83

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

DATE	Ticket #	RIG #	KIND OF TEST	OIL CO.	Well #	State	Sec. T. Range	
4/24	1190	American #2	^{SURFACE} Nipple up	Amoco	Alva D. murdock 1	Utah	8-45-8W	SURFACE R
5/25	994	American #2	TEST (TRIP)	Amoco	Alva D. murdock 1	Utah	8-45-8W	R

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING**SUNDRY NOTICES AND REPORTS ON WELLS**(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. FEE	
2. NAME OF OPERATOR AMOCO PRODUCTION COMPANY		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 829, Evanston, Wyoming 82930		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1978' FNL & 1980' FEL CSW/4 NE/4		8. FARM OR LEASE NAME Alva P. Murdock	
14. PERMIT NO. 43-043-30731		9. WELL NO. #1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 7949' GR		10. FIELD AND POOL, OR WILDCAT	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 8, T4S, R8W, USM	
		12. COUNTY OR PARISH Duchesne	13. STATE Utah

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐Report of Operations ☒

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

June 16, 1983

Current TD - 8669'

**TIGHT
HOLE**

18. I hereby certify that the foregoing is true and correct

SIGNED

Larry J. Smith

TITLE Staff Admin. Analyst (SG)

DATE

6/25/83

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. Fee
2. NAME OF OPERATOR Amoco Production Company		6. IF INDIAN, ALLOTTED OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 829 Evanston, WY 82930		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1978' FNL & 1980' FEL SW/4 NE/4		8. FARM OR LEASE NAME Alva P. Murdock
14. PERMIT NO. 43-013-30731	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 7949' GR	9. WELL NO. #1
		10. FIELD AND POOL, OR WILDCAT Wildcat
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 8, T4S, R8W, USM
		12. COUNTY OR PARISH Duchesne
		13. STATE Utah

18. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>	Report of Operations	<input checked="" type="checkbox"/>

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

July 15, 1983

Current TD: 10,768'

TIGHT HOLE

18. I hereby certify that the foregoing is true and correct.

SIGNED

TITLE Staff Admin Analyst (SG)

DATE

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES,
DIVISION OF OIL, GAS, AND MINING

SUBMIT IN TRIPLICATE*
(Or instructions on
reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. Fee
2. NAME OF OPERATOR AMOCO PRODUCTION COMPANY		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR DRAWER 829 EVANSTON, WY 82930		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1978' FNL & 1980' FEL		8. FARM OR LEASE NAME Alva P. Murdock
14. PERMIT NO. 43-013-30731		9. WELL NO. #1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 7949' GR		10. FIELD AND POOL, OR WILDCAT Wildcat
		11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA Sec. 8 T4S, R8W, USM
		12. COUNTY OR PARISH Duchesne
		13. STATE Utah

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input checked="" type="checkbox"/> Report of Operations	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

August 24, 1983
Current TD: 10,785'

TIGHT HOLE

18. I hereby certify that the foregoing is true and correct

SIGNED R. J. Weber

TITLE Staff Admin. Analyst (SG) DATE 8-30-83

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side

DATE	TICKET #	KIG #	of TEST	OIL Co.	Well #	State	Sec. T. Range
7/10	1345	Gamech ^{er} 4	TEST	Amoco	ALUC Muddock #1	Utah	8-4S-8W

STATE
R

POOR COPY

ORAL APPROVAL TO PLUG AND ABANDON WELL

TIGHT HOLE

Operator Amoco Representative AI ANDERSON
 Well No. 1 Location SW 1/4 NE 1/4 Section 8 Township 4S Range 8W
 County DUCHESS Field _____ State UT

Unit Name and Required Depth ELVA P. MURDOCK Base of fresh water sands _____

T.D. 10,768' Size hole and Fill per sack 7 7/8" Mud Weight and Top _____ #/gal. _____

Casing Size	Set At	Top of Cement	To Be Pulled	Plugging Requirements		
				From	To	Sacks Cement
<u>11 3/4"</u>	<u>2591</u>	<u>SFCE</u>		<u>Unit Mt @ 4900'</u>		<u>Squeeze w/ 200-250 SKS.</u>
<u>8 7/8"</u>	<u>7533</u>	<u>SFCE</u>				
<u>6 5/8"</u>	<u>7120'</u>	<u>TD</u>				
Formation	Top	Base	Shows	<u>(2) 25 ANS @ surface in 8 7/8" CSG</u>		
<u>TGR</u>	<u>4160</u>			<u>+ CK. ANNULUS</u>		
<u>TW</u>	<u>7188'</u>					
<u>NORTH HORN</u>	<u>10,400'</u>					

REMARKS

DST's, lost circulation zones, water zones, etc., _____

SQUEEZED 6 5/8" LINER: 107 ANS 7 10488'-82'
100 SKS 7 10236'-38'
100 ANS 7 9050'-52'
225 ANS 7 7120'-7533'

Approved by R.J. Firth Date 10/12/83 Time _____ a.m. p.m.

PERFS: 10 5 1/2' - 88' > Unit Mt @ 10450'
3 ADDITIONAL ZONES PERFO. + PLUGGED. > LINER
PRESNT PERFS: 8 5/8" CSG 7 6456' - 7000'
245 ANS. 5710' - 6045'
4940 - 5252'

DOUBLE "D" ENTERPRISES

B.O.P. Test Report

B.O.P. TEST PERFORMED ON: 7-15, 7-16, 8-3

OIL CO: A m o c o

WELL NAME & NUMBER Alma Murdock

SECTION: 8

TOWNSHIP: 43

RANGE: 84

COUNTY: Duchesne

STATE: UTAH

DRILLING CONTRACTOR: Hammiche

TESTED BY:

DOUBLE "D" ENTERPRISES, INC.
712 Morse Lee Street
Evanston, Wyoming 82930

PHONE NUMBERS:

(307) 789-9213, OR (307) 789-9214

EVANSTON SHOP ADDRESS:
96 WILLOW WAY
SUNSET INDUSTRIAL PARK
EVANSTON, WYOMING 82930

INVOICES BILLED OUT OF:

DOUBLE "D" ENTERPRISES, INC.
P.O. Box 560
Shoshoni, Wyoming 82649

OIL CO. SITE REPRESENTATIVE: Butch Ring

RIG TOOL PUSHER:

TESTED OUT OF Evanston OFFICE:

NOTIFIED

COPIES OF THIS TEST REPORT SENT COPIES TO: Division of Oil & Gas Minerals

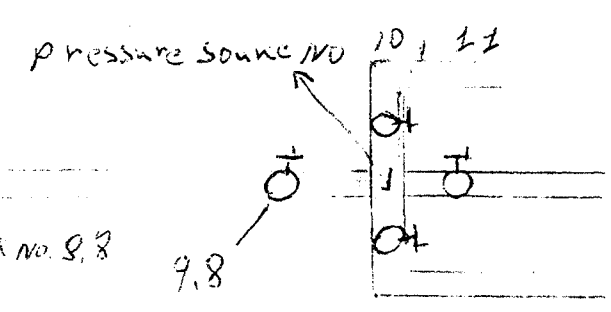
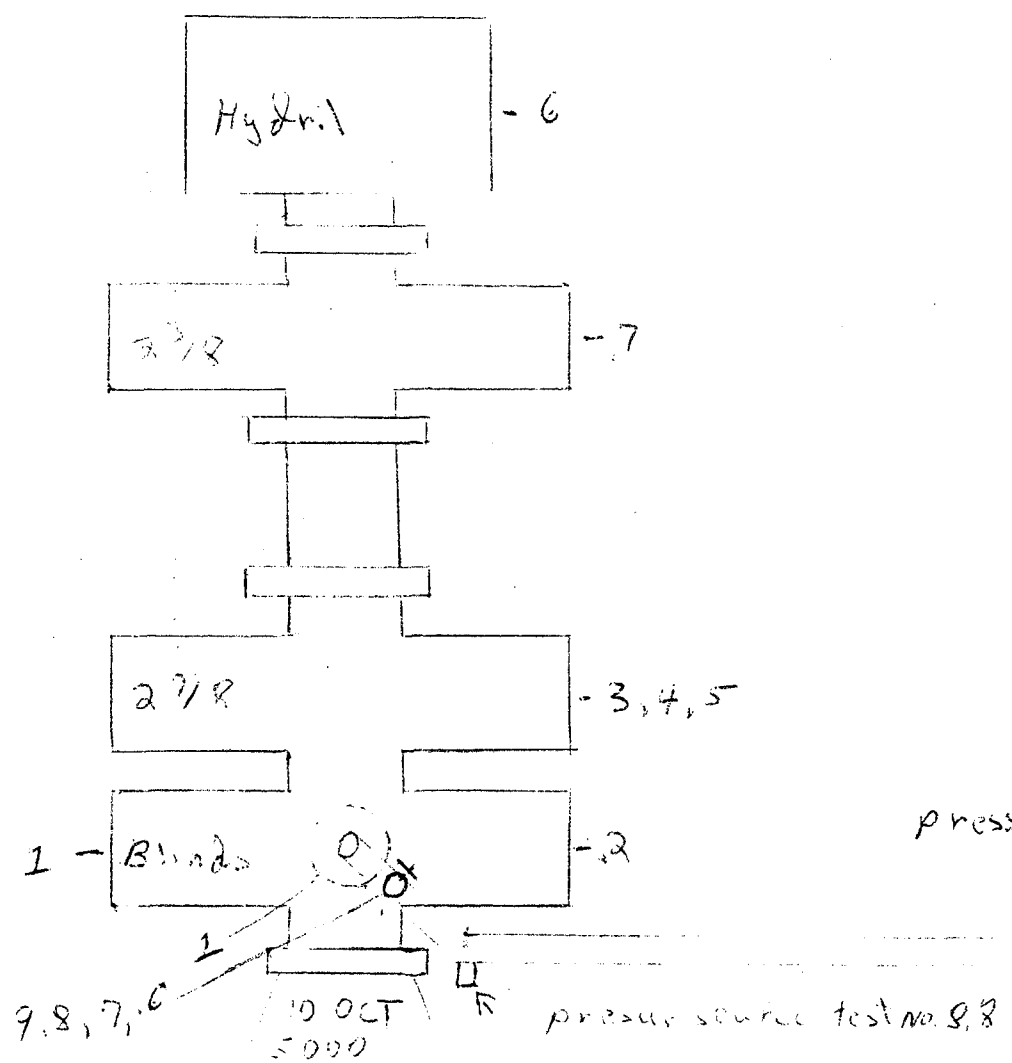
ORIGINAL CHART & TEST REPORT ON FILE AT: Evanston OFFICE

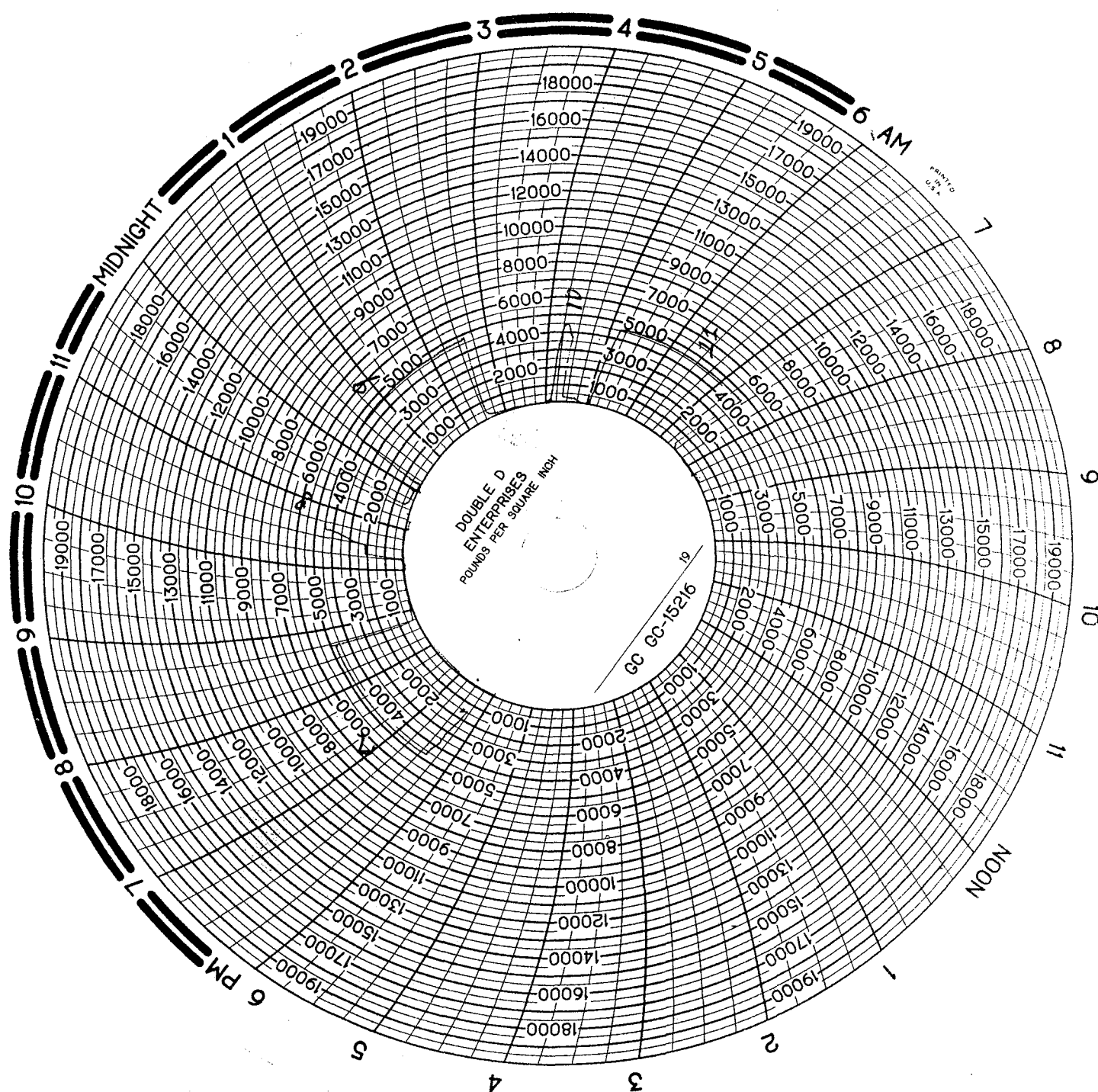
Shane McKeown Phone Number
Mike Rykhus Phone Number 307 789-5162
Evanston, Wyoming 82930

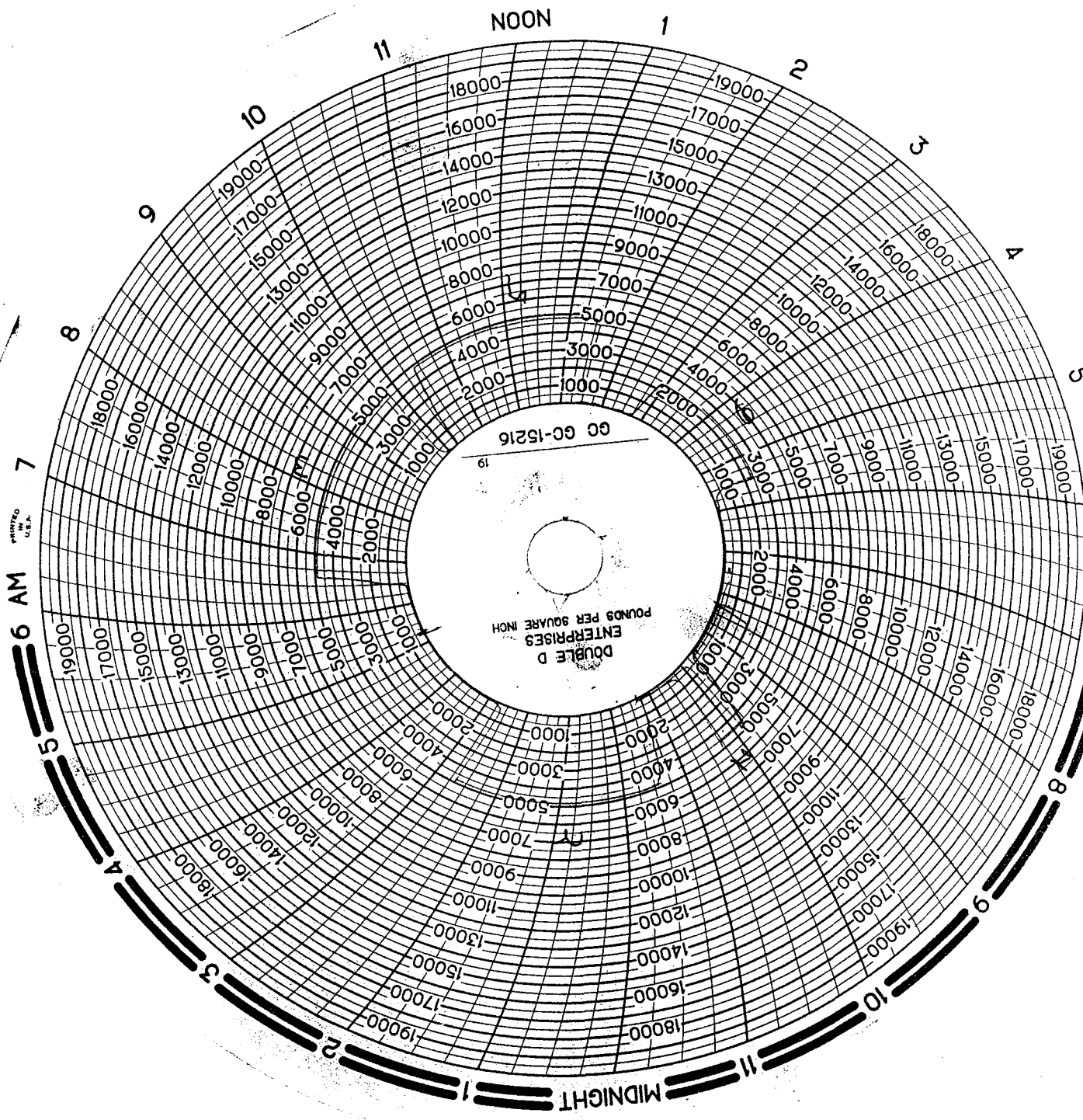
POOR COPY

Company	Lease & Well Name #	Date of Test	Fig
A moco	A Loo. Murdock.	7-16-17-83	Ganahan
Test #	Time		
1	6:15-6:30	Leak on Blind Rams mud seals tighten companion flange and ram seal on choke line.	
2	6:30-6:45	test on Blind Rams	
3	6:55-7:10	test on 2 3/8 pipe Rams and Manifold on choke line. Leak on mud seals	
4		touched Rams several times	
5	7:15-7:30	Re-test pipe Rams, still a leak on mud seals	
	7:30-7:40	watch Hydri!	
6	7:40-7:55	test Hydri!	
	8:00-8:15	tightened mud seals packing nuts tested 2 3/8 pipe Rams leak on row on top of double (C.P.C. made up)	
7	8:15-8:30	test 2 3/8 Rams manual on blind rams flange, all mud seals held good + no rows or flange leaking	
		back on 7-16 put choke line together + manifold	
8		leak on choke line manual stem packing worked valves several times	
9		test first manual on choke manifold	
		leak on testing sledge	
10		test 3 manifolds on	
11		manifold	

POOR COPY







DOUBLE D
ENTERPRISES
POUNDS PER SQUARE INCH
GC GC-15216
19

6 AM
7
PRINTED IN U.S.A.

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. FEE	
2. NAME OF OPERATOR Amoco Production Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P.O. Box 829, Evanston, WY 82930		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface		8. FARM OR LEASE NAME Alva P. Murdock	
14. PERMIT NO. 43-013-30731		9. WELL NO. #1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 7949'		10. FIELD AND POOL, OR WILDCAT Wildcat	
		11. SEC., T., R., M., OR BLK. AND SUBVEY OR AREA Sec. 8, T4S, R8W, USM	
		12. COUNTY OR PARISH Duchesne	
		13. STATE Utah	

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐
☐
☐
☐

PULL OR ALTER CASING

☐
☐
☐
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
☐
☐
☐

FRACTURE TREATMENT

REPAIRING WELL

☐
☐
☐
☐

SHOOTING OR ACIDIZING

ALTERING CASING

(Other)

Report of Operation

ABANDONMENT*

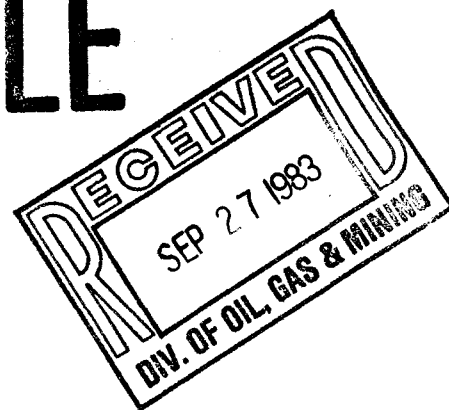
☒
(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Sept. 15, 1983

Drilling Ahead

Total Depth 10,785'

TIGHT
HOLE

18. I hereby certify that the foregoing is true and correct

SIGNED

Larry J. Smith

TITLE

Staff Admin. Analyst (SG)

DATE

9/28/83

(This space for Federal or State office use)

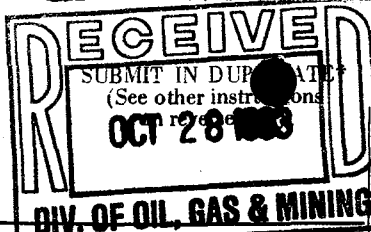
APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING



56 64 01

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:				OIL WELL <input type="checkbox"/>		GAS WELL <input type="checkbox"/>		DRY <input checked="" type="checkbox"/>		Other _____	
b. TYPE OF COMPLETION:				NEW WELL <input checked="" type="checkbox"/>		WORK OVER <input type="checkbox"/>		DEEP-EN <input type="checkbox"/>		PLUG BACK <input type="checkbox"/>	
								DIFF. RESVR. <input type="checkbox"/>		Other _____	
2. NAME OF OPERATOR Amoco Production Company											
3. ADDRESS OF OPERATOR P.O. Box 829, Evanston, Wyoming 82930											
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface SW/4 NE/4 Sec. 8, T4S, R8W Duchesne Co., Utah At top prod. interval reported below At total depth											
14. PERMIT NO. 43-013-30731				DATE ISSUED 12-21-82				5. LEASE DESIGNATION AND SERIAL NO.			
								FEE			
								6. IF INDIAN, ALLOTTEE OR TRIBE NAME			
								7. UNIT AGREEMENT NAME			
								8. FARM OR LEASE NAME Alva P. Murdock			
								9. WELL NO. #1			
								10. FIELD AND POOL, OR WILDCAT Wildcat			
								11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 8, T4S, R8W, USM			
15. DATE SPUDDED 2-9-83				16. DATE T.D. REACHED 7-2-83		17. DATE COMPL. (Ready to prod.) -		18. ELEVATIONS (DF, R&B, RT, GR, ETC.)* 7944' KB		19. ELEV. CASINGHEAD 7920' GL	
20. TOTAL DEPTH, MD & TVD 10768 MD		21. PLUG, BACK T.D., MD & TVD Surface		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY → Surf to TD		ROTARY TOOLS		CABLE TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* None										25. WAS DIRECTIONAL SURVEY MADE Yes	
26. TYPE ELECTRIC AND OTHER LOGS RUN DIL-MSFL, BHC, EPT, VSP, CBL										27. WAS WELL CORRED No	
28. CASING RECORD (Report all strings set in well)											
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED	
11-3/4		60		2591		17-1/2		2230 sxs 65:35:6 and G		None	
8-5/8		32		7533		9-7/8		350 sxs G and A		None	
29. LINER RECORD											
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)		PACKER SET (MD)	
6-5/8"		7120		10763		525					
30. TUBING RECORD											
SIZE		DEPTH SET (MD)		PACKER SET (MD)							
31. PERFORATION RECORD (Interval, size and number) See Attached											
32. ACID, SHOT, STRETCH, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) _____ AMOUNT AND KIND OF MATERIAL USED See Attached											
33.* PRODUCTION											
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)						WELL STATUS (Producing or shut-in) P & A			
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD →		OIL—BBL.		GAS—MCF.	
										WATER—BBL.	
										GAS-OIL RATIO	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE →		OIL—BBL.		GAS—MCF.		WATER—BBL.	
										OIL GRAVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)										TEST WITNESSED BY	
35. LIST OF ATTACHMENTS Perforation and Stimulation Record											
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records											
SIGNED		<i>Larry T. Smith</i>				TITLE				Staff Admin. Analyst (SG)	
										DATE	
										10/26/83	

*(See Instructions and Spaces for Additional Data on Reverse Side)

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments. **Items 22 and 24:** If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

No DST
No Cores

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				38. GEOLOGIC MARKERS			
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TOP	TRUE VERT. DEPTH
				Green River	4160'		
				Wasatch	7188'		
				North Horn	10400'		

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. Fee <input checked="" type="checkbox"/>
2. NAME OF OPERATOR Amoco Production Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 1013 Cheyenne Drive, P.O. Box 829, Evanston, WY 82930		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SW/4 NE/4 Sec. 8, T4S, R8W, Duchesne Co., Utah		8. FARM OR LEASE NAME Alva P, Murdock
14. PERMIT NO. 43-013-30731		9. WELL NO. #1
15. ELEVATIONS (Show whether OF, RT, GR, etc.) 7944' KB 7920' GL		10. FIELD AND POOL, OR WILDCAT Wildcat
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 8, T4S, R8W, USM
		12. COUNTY OR PARISH Duchesne
		13. STATE Utah

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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PULL OR ALTER CASING

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☐
☐
☐
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FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
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FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Plug Data

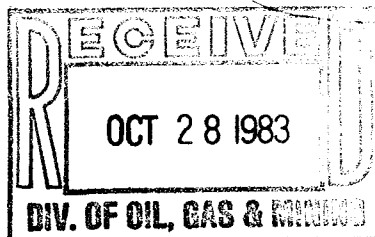
From	To	Sax Cement
45	Surface	25
5252	4900	245
6045	5342	245
10084	100500	150
10468	10250	150
10588	10468	100

Formation Tops

Green River	4160'
Wasatch	7188'
North Horn	10,400'

Both the 8-5/8" csg. annulus and 11-3/4 annulus were cemented to surface. Additional block squeezes were done at 10480' (100 sxs), 10236' (100 sxs), 9050' (100 sxs), and 7120' (225 sxs).

Verbal approval from Ron Firth at 11:00 A.M. on 10/12/83.

APPROVED BY THE STATE
OF UTAH DIVISION OF
OIL, GAS, AND MININGDATE: 10/26/83
BY: [Signature]TIGHT
HOLE

18. I hereby certify that the foregoing is true and correct

SIGNED [Signature]

TITLE Staff Admin Analyst (SG)

DATE 10/26/83

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE _____

Perforations:	4" csg guns at 4JSPF	Acid Stimulation	Cement
Squeeze:	Liner top at 7120'		225 sxs
	10480-10482'		100 sxs
	10236-10238'		100 sxs
	9050-9052'		100 sxs

Test	Production:	10545-10591'	100 sxs
1	10270-280', 10284-293', 10386-392', 10413-421', 10437-441'		150 sxs
2	10118-128', 10194-201', 10223-228'	2646 gal 15% HCl	
3	10057-071', 10078-84'		150 sxs
4	9759-772', 9840-846', 9855-869', 9889-893', 9936-943', 9948-964', 9984-990', 10003-010', 10028-034'	8250 gal 15% HCl	
5	7612-7626'	1050 gal 7½% HCl	
6	6470-90', 6502-14', 6524-34', 6557-68', 6629-47', 6876-94', 6994-7012'	15162 gal 7½% HCl	
7	6039-45', 5918-36', 5907-14', 5734-48', 5710-22'		245 sxs
8	4940-50', 4982-5004', 5097-110', 5123-135', 5142-150', 5164-173', 5181-198', 5198-202', 5208-234', 5238-252'		440 sxs



Amoco Production Company

July 30, 1984

1983
RECEIVED

AUG 1 1984

Utah Division of Oil Gas & Mining
4241 State Office Building
Salt Lake City, Utah 84114

DIVISION OF OIL
GAS & MINING

Attn: Pam Kanna

File: JEK-951/WF


Re: Alva P. Murdock, Deseret WI #1, State of Utah "S" #1
and the Gillmore #1 Wells

Ms. Kanna:

45. 8 W. 8,

In regards to the above referenced wells, they were all drilled, P & A'd and completed as dry holes. There was no production of any kind on any of these wells.

If you have any questions in the future in regards to production will you please direct your correspondence to our Production and Revenue Supervisor in writing.


Louis F. Lozzie
Administrative Supervisor

KG/



STATE OF UTAH
NATURAL RESOURCES
Oil, Gas & Mining

Scott M. Matheson, Governor
Temple A. Reynolds, Executive Director
Dianne R. Nielson, Ph.D., Division Director

4241 State Office Building • Salt Lake City, UT 84114 • 801-533-5771

May 22, 1984

Amoco Production Company
P O Box 829
Evanston, Wyoming 82930

RE: Well No. Alva P Murdock #1
API #43-013-30731
1978' FNL, 1980' FEL C SW/NE
Sec. 8, T. 4S, R. 8W.
Duchesne, Utah

Gentlemen:

According to our records, a "Well Completion Report" filed with this office October 26, 1983, on the above referred to well, indicates the following electric logs were run: DIL-MSFL, GNC, EPT, VSP and CBL. As of today's date, this office has not received these logs.

Rule C-5, General Rules and Regulations and Rules of Practice and Procedure, requires that a well log shall be filed with the Commission together with a copy of the electric and radioactivity logs.

We will be happy to acknowledge receipt of your response to this notice if you will include an extra copy of the transmittal letter with a place for our signature, and a self addressed envelope for the return. Such acknowledgment should avoid unnecessary mailing of a second notice from our agency.

Your prompt attention to the above will be greatly appreciated.

Respectfully,

Claudia Jones
Well Records Specialist

CJ/cj

cc: Dianne R. Nielson, Director
Ronald J. Firth, Associate Director

89260



STATE OF UTAH
NATURAL RESOURCES
Oil, Gas & Mining

Scott M. Matheson, Governor
Temple A. Reynolds, Executive Director
Dianne R. Nielson, Ph.D., Division Director

4241 State Office Building • Salt Lake City, UT 84114 • 801-533-5771

October 30, 1984

Amoco Production Company
P.O. Box 829
Evanston, Wyoming 82930

2nd NOTICE

Gentlemen:

Re: Well No. Alva P. Murdock #1 - Sec. 8, T. 4S., R. 8W.
Duchesne County, Utah - API #43-013-30731

A letter requesting that you send in the electric logs for the above referred to well was sent from our office on May 22, 1984. A copy of this letter is enclosed. As of today's date this office has yet to receive these logs.

****You are in violation of Rule C-5. If you wish to continue developing business in the State of Utah, compliance with pertinent rules and regulations is essential. Further delay in your attention to this matter may result in punitive action. Please submit the required information as stated above within fifteen (15) days.**

Respectfully,

Norman C. Stout
Administrative Assistant

clj
Enclosure
cc: Dianne R. Nielson
Ronald J. Firth
John R. Baza
File
00000011/1



December 17, 1984

DEC 21 1984

DIVISION OF
OIL, GAS & MINING

Jim Thompson
State of Utah
Natural Resources
Oil, Gas & Mining
4241 State Office Building
Salt Lake City, Utah 84114

Amoco Production Company

P. O. Box 829

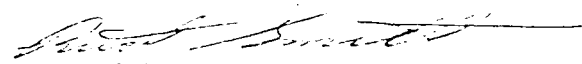
Evanston, Wyoming 82930

Re: Your letter of September 10, 1984 concerning the
reclamation status of the:
Alva P. Murdock Well #1, Section 8, T4S, R8W,
Duchesne County, Utah.

Mr. Thompson:

The reserve pit on the Murdock #1 was filled and the location and pit areas recontoured and topsoiled in September of 1984. The only work remaining is seeding which will be completed in the Spring of 1985 as early as weather and ground conditions permit.

If you have any questions please contact me at our office (307) 789-1700 X 2202.


Reid Smith
Amoco Production Company

KG/



RECEIVED
DEC 21 1984

Amoco Production Company

P. O. Box 829

Evanston, Wyoming 82930

December 17, 1984

DIVISION OF
OIL, GAS & MINING

Jim Thompson
State of Utah
Natural Resources
Oil, Gas & Mining
4241 State Office Building
Salt Lake City, Utah 84114

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Amoco Production Company

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